

SOUTHERN ILLINOIS CONTINUUM OF CARE

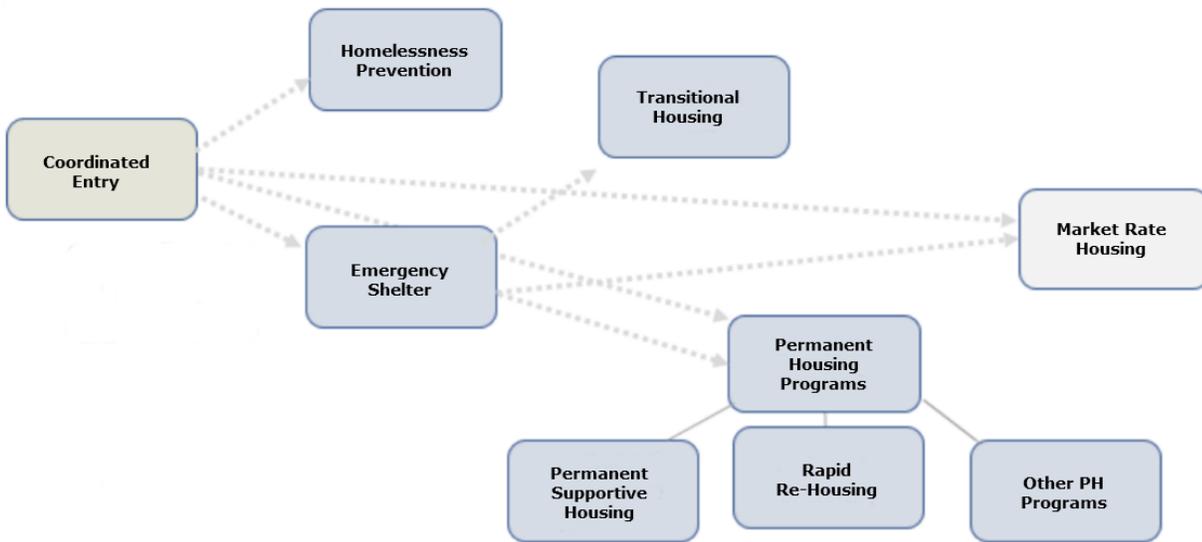


Coordinated Entry Policies and Procedures

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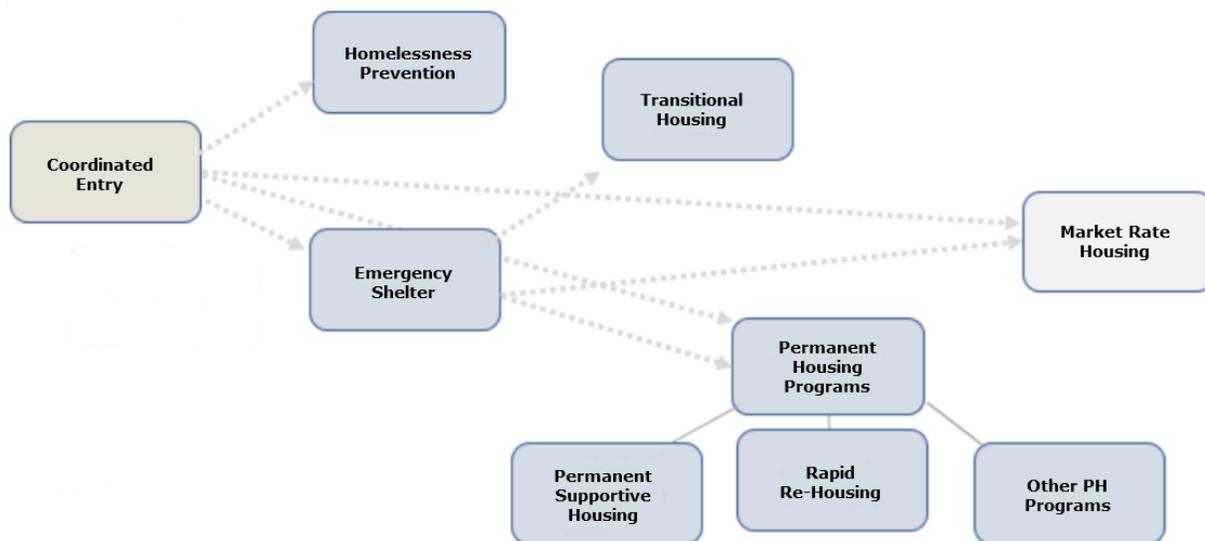
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Introduction

The Southern Illinois Continuum of Care has established a Coordinated Entry process in order to ensure that housing and services are prioritized based on vulnerability and severity of assistance needs so that people who need help the most can receive it in a timely manner.

As the diagram from the US Dept. of Housing and Urban Development below illustrates, the Coordinated Entry Process provides multiple pathways to housing (or housing stability) for people who are homeless or at risk of homelessness. A family's needs and preferences must be taken into account when determining which route to take.



Geographic Coverage

This Coordinated Entry system covers the entire geographic area of Southern Illinois, IL. Homeless and at-risk families and individuals can present for services at any homeless housing and service provider. These Coordinated Entry Access Points cover and are accessible throughout the entire CoC.

Public Awareness

The Coordinated Entry process and associated housing and supportive services are affirmatively marketed to and available to eligible persons regardless of race, color, national origin, religion, sex, familial status, marital status, disability, sexual orientation or gender identity. Outreach services to those who are least likely to apply in the absence of special outreach.

Accessing the Coordinated Entry System

All people in different populations and subpopulations in Southern Illinois, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, must have fair and equal access to the Coordinated Entry process.

The Southern Illinois Continuum of Care has adopted a “No Wrong Door” approach to Coordinated Entry. The same assessment approach, including standardized decision-making, is offered at all Access Points and all Access Points are usable by all people who may be experiencing homelessness or are at risk of homelessness.

Specialized Access Points have been established to meet the unique needs of people who are or have been a victim of domestic violence, dating violence, sexual assault or stalking. Persons who indicate they are fleeing a dangerous situation should be immediately referred to one of the Continuum’s three victim services providers. Contact information for each provider is included below:

Cario Women’s Shelter – 618.734.4357

Stopping Women’s Abuse Now – 1.888.715.6260

Women’s Center – 618.529.2324

Emergency Services

Emergency services, including all domestic violence and emergency services hotlines, emergency shelters and domestic violence shelters must operate with as few barriers to entry as possible. People must be able to access emergency services independent of Coordinated Entry intake and assessment operating hours. Pre-screening is not required prior to emergency services program entry under these circumstances.

When emergency services are provided before a pre-screening is administered, the family or individual must be screened by the end of the next business day.

Domestic Violence

No one will be denied access to the Coordinated Entry process - or any Access Point - on the basis that he or she is or has been a victim of domestic violence, dating violence, sexual assault or stalking. All persons seeking shelter or services from non-victim service providers, must have safe and confidential access to the Coordinated Entry process and victim services and immediate access to emergency services such as domestic violence hotlines and shelter.

Nondiscrimination

Organizations participating in the Coordinated Entry process that are recipients of federal and state funds must comply with applicable civil rights and fair housing laws and requirements. Steering participants toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability or the presence of children is strictly prohibited. Persons served through the Coordinated Entry process must be informed of the ability to file a non-discrimination complaint if they feel their rights have been violated.

Persons with Disabilities

Access Points must be physically accessible to individuals with disabilities, including people who use wheelchairs. The CoC will also ensure that Access Points are located in areas convenient to people who are least likely to access homeless assistance.

The Pre-Screening Process

The first phase of the Coordinated Entry process involves pre-screening for diversion or prevention. Limited information about individuals and families is collected at this point. The focus of the pre-screen process is to aid individuals in resolving an immediate housing crisis. If the person is unable to resolve his or her homelessness independently within five days, a more comprehensive assessment will be conducted. The pre-screen step helps the Continuum of Care ensure that only people who need permanent housing end up on the Coordinated Entry Priority List. If prevention or other mainstream services can address the housing needs of a family or individual, a referral to these services should be offered at this point.

There are at least two significant benefits to including this diversion step in the Pre-Screening process. People receive services that are the most appropriate for them, and wait lists for permanent housing are shortened.

Pre-screening must occur when a family or individual first contacts in person a provider that is serving as a Coordinated Entry Access Point or, in an emergency or after hours situation, as soon after that first contact as possible. If a family or individual is fleeing domestic violence or sexual abuse and chooses to be immediately referred to a domestic violence services provider, pre-screening should take place at the domestic violence provider.

Pre-Screening Instrument

The Southern Illinois Continuum of Care's Coordinated Entry process utilizes a pre-screening instrument designed to:

- screen for homelessness/chronic homelessness
- assess housing needs to determine need for diversion/prevention services or emergency shelter
- identify barriers to housing

Based on information supplied during the pre-screening, a family or individual may be referred for prevention services or other mainstream assistance, or may move to the Assessment stage of the Coordinated Entry process.

Performing a Pre-Screening

People who are being screened must be freely allowed to decide what information they provide during the pre-screening process, to refuse to answer questions and to refuse housing and service options without retribution and without limits being placed on their access to other forms of assistance. *Note: collection of specific information may be required to establish or document eligibility for certain programs.*

Pre-screen information can be manually entered into HMIS in real time, as part of the client's initial interview, or recorded on the pre-screen assessment form included as **Exhibit 1** in this Policy and Procedure Guide. When a paper pre-screening assessment is created, staff must enter the information in to HMIS within two business days of the pre-screen interview.

Shelter Placement

People who are literally homeless should be offered a referral to a local emergency shelter. People fleeing domestic violence must be immediately offered a referral to a local domestic violence provider. People have a right to refuse these referrals and still continue through the Coordinated Entry process. People do not have to complete a Coordinated Entry assessment in order to receive a shelter referral.

The Assessment Process

If pre-screen results indicate that a family or individual is homeless, an assessment of the family or individual must be conducted within 5 days of enrollment into emergency shelter, utilizing the appropriate version of the VI-SPDAT.

Assessment Approach

The Southern Illinois Continuum of Care is striving to create a person-centered Housing First approaches to ending families' and individuals' homelessness. This means that everyone involved in the Coordinated Entry process must work to ensure that people who are assessed are asked about their preferences regarding location and type of housing, level and type of services, and other characteristics of projects where they may be referred, and that these preferences are taken into account when offering referral options.

Assessment Instrument

No matter at which organization a person enters the Coordinated Entry process, that person will be prioritized for housing and services using the VI-SPDAT. Versions of this assessment instrument for single adults, families and unaccompanied youth are available at <http://orgcode.nationbuilder.com/spdat>. Agency staff administering and scoring these assessments must have successfully completed VI-SPDAT training offered by the Continuum of Care.

Staff administering and scoring the VI-SPDAT are prohibited from screening people out of the Coordinated Entry process due to perceived barriers to housing or services, including but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that may be needed, history of evictions, poor credit, lease violations or the absence of previous leases, or criminal record.

Performing an Assessment

As noted above, assessments must be performed within 5 days of enrollment into an emergency shelter program. Though there are different assessments for families, single adults and unaccompanied youth, each assessment collects:

- Basic Information (name, date of birth, preferred language, etc.)
- History of Housing and Homelessness
- Risks

- Socialization and Daily Functioning
- Wellness
- Family Unit (if not unaccompanied)

Assessment responses are scored and a total score is generated. A person's total score is used to determine their place on the Continuum-wide priority list for permanent housing.

People administering the assessment must use the introductory script supplied to them by the Continuum of Care. No part of the script may be skipped.

People who are being assessed must be freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions and to refuse housing and service options without retribution and without limits being placed on their access to other forms of assistance. *Note: collection of specific information may be required to establish or document eligibility for certain programs.*

Information collected before or during the assessment process may not be used to screen people out of housing referrals due to perceived barriers to housing or services, including but not limited to, too little or no income, active or a history of substance abuse, domestic violence history, resistance to receiving services, the type or extent of a disability, disability-related services or supports that are needed, history of evictions or poor credit, lease violations or lack of a leasing history, or criminal record. During the assessment process, participants must be informed of the ability to file a non-discrimination complaint.

Eligibility Determination

Information collected during assessment may be used to determine eligibility for certain programs and services in the Continuum of Care. This is a different process than prioritization, detailed below. Though assessment data cannot be used to discriminate, in certain circumstances some projects may use disability status or other protected class information to limit enrollment, but only if Federal or State statute explicitly allows the limitation. For instance, some permanent housing programs require a mental health disability, and HOPWA programs require an HIV diagnosis.

The Prioritization Process

Prioritization Factors

The Southern Illinois Continuum of Care utilizes OrgCode's VI-SPDAT to prioritize referrals to available housing resources. The VI-SPDAT uses the following factors to determine vulnerability:

- Risk of harm, as evidenced by recent encounters with healthcare and crisis services, law enforcement and the criminal justice system, legal issues and risk of exploitation
- Issues with socialization and daily functioning, such as money management, meaningful daily activity, self-care and social relationships
- Wellness, as reflected by status of physical health and mental health, and any medications, substance abuse, tri-morbidity, abuse or other trauma

The VI-SPDAT assigns a score to each client, based on these factors. These scores, along with the dates that each family or individual most recently entered the Coordinated Entry process, determine each

family or individual's ranking on the Priority List. Any housing preferences expressed during the Assessment process are also noted on the Priority List and are used when determining housing placement options.

Data collected during the assessment process must not be used to prioritize households for housing and services on a protected basis, such as race, color, religion, national origin, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or marital status.

Priority List

The Priority List is maintained in real time within Southern Illinois's HMIS. It is very important that people be added to the Priority List as soon as their assessments have been completed, and removed from the Priority List as soon as they have been referred to housing or have otherwise exited the Coordinated Entry process.

Priority List, referral and housing placement activity is monitored on a monthly basis to ensure that Coordinated Entry policies and procedures are followed. Client information in the Priority List is covered by the same privacy and security protections prescribed by HUD for HMIS practices in the HMIS Data and Technical Standards.

Priority Ranking

As mentioned above, each family and individual on the Priority List has a VI-SPDAT score that is used to determine the type of housing to be offered to them, and their place in line for that housing. Complete lists of current priority ranking criteria are contained in the Continuum of Care's Transitional Housing Assistance, Rapid Rehousing Assistance and Permanent Housing Assistance Policies. Any housing preferences mentioned during the assessment process must also be considered when presenting referral options to clients.

The Referral Process

The Southern Illinois Continuum of Care has incorporated a person-centered approach into its referral policies and procedures. This means that as referrals are made, potential program participants have choices regarding location and type of housing, level and type of services, and other project characteristics. During the referral process, people must be provided with options and recommendations that guide and inform their choices and don't make rigid decisions about what they need. People have the right to decline a referral to housing that they feel does not meet their needs.

Housing Referrals

When a vacancy in Permanent Housing, Rapid Re-housing or Transitional Housing program exists, that vacancy must be filled from the Coordinated Entry Priority List. There are no exceptions to this rule. Perceived barriers to housing or services must not be used to reduce or eliminate a household or individual's referral options.

The following guidelines must be used when preparing referral options:

- If a family or individual's VI-SPDAT score is equal to or greater than 10, the family or individual is recommended for referral to a Permanent Housing program

- If the VI-SPDAT score is between 5 and 9, a Rapid Re-housing referral is appropriate
- Scores of less than 5 indicate that other options (transitional housing, etc.) should be pursued

Referrals for Services

Referrals for prevention and other, mainstream services may be made following pre-screening, and between placement on the Priority List and housing placement. The process of prioritizing access to ESG prevention funds must be developed collaboratively by the CoC and the recipient of ESG funding for Southern Illinois.

Data Management

HMIS

Organizations participating in Coordinated Entry, with the exception of domestic violence services providers, are required to use the CoC's Homeless Management Information System (HMIS) to collect and report data on persons served in the Coordinated Entry process. Organizations that access HMIS must participate in the Coordinated Entry process. Domestic violence services providers must use a comparable database (as defined in HUD's HMIS Data and Technical Standards), which is not linked to the CoC's HMIS.

Privacy Protections

To protect personal privacy, Coordinated Entry staff should collect only enough participant information to prioritize and make referrals to available housing and support services. Disclosure of specific disabilities or diagnosis must not be required unless needed to determine program eligibility or to make appropriate referrals.

Personal information must not be shared between organizations participating in the Coordinated Entry process unless the affected individual has consented to information sharing, and that consent has been properly documented. Services must not be denied to participants who refuse to allow their data to be shared unless Federal statute requires collection, use, storage and reporting of a participant's personally identifiable information as a condition of program participation.

Secure Document Management

When physical documents (printed assessments, priority lists, referral forms, etc.) containing personal information are created during the Coordinated Entry process, the following best practices must be followed.

Limited Access

Access to these documents must be granted only to people who need the information contained in these document to do their work.

Secure Storage

These documents, when not in use, must be securely stored and protected either in locked cabinets or a locked room.

Retention and Destruction

These documents must be completely destroyed (shredded or burned) when they are no longer needed or when the document retention period adopted by the organization that holds the documents expires, whichever is longer.

Other Standards and Requirements

Where there is a conflict between a Coordinated Entry privacy protection and a law, licensing requirement or professional standard, the more stringent of the two applies.

Definitions:

Access Points – The engagement point for persons experiencing a housing crisis. Persons (families, single adults, youth) access the crisis response system by calling a crisis hotline or walking into an access point facility. In the Southern Illinois Continuum of Care ALL agencies receiving Emergency Solution Grant or Continuum of Care funds are a designated access point for Coordinated Entry.

Coordinated Entry – Coordinated Entry is a consistent, streamlined process for accessing the resources available in the homeless crisis response system. The CoC Interim Rule requires the CoC to establish and operate a coordinated entry system (CES). The rule defines coordinated entry as a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. [Such a] system covers the [CoC's] geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised and includes a comprehensive and standardized assessment tool.(24 CFR part 578.3)

Diversion – Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion programs can reduce the number of families becoming homeless, the demand for shelter beds, and the size of program prioritization lists. The main difference between diversion and other permanent housing-focused interventions centers on the point at which intervention occurs. Prevention targets people at imminent risk of homelessness, diversion targets people as they are applying for entry into shelter, and rapid re-housing/permanent supportive housing targets people who are already homeless.

Prioritization List – A list ranking individuals in need of housing and services based on VI-SPDAT scores. Each Access Point will refer individuals with completed VI SPDATs for inclusion on the list for purposes of prioritization and housing placement. CoC and ESG funded agencies must fill vacancies by taking referrals off the prioritization list for their programs.

Warm Hand-Off Referral – A referral made directly between the “referring agency” and the “receiving agency”. Using HMIS, the “referring agency” sends an electronic referral to the “receiving agency” with the information required to take action on the referral. This includes information collected through the initial pre-screen and the results of the VI-SPDAT assessment (if applicable).

VI-SPDAT – (Vulnerability Index-Service Prioritization Decision Assistance Tool) An evidence based Common Assessment or Prescreen Triage Tool to be used by all projects in the Southern Illinois Continuum of Care for housing triage, prioritization and housing placement. There is a Youth VI-SPDAT for use specifically with youth between 18-24 years of age.

Exhibit 1

Pre-screen information can be collected using the Hard Copy Pre-scre Assessment form included on the next page. When a paper pre-screening assessment is created, staff must enter the information in to HMIS within two business days of the pre-screen interview. Included below is a recommended script to use when walking the client through the pre-screen process.

“Hello. My name is [] and I work for []. I have a few basic questions to ask you. The answers will help us determine how we can go about providing assistance to you and your family. Most questions only require a "yes" or "no." answer. Some questions require a one word answer. The information collected goes into our data system, which will ensure that instead of going to a number of different agencies to get on waiting lists, you will only have to answer these questions one time.

After the survey, I can share recommendations with you and give you some basic information about resources that could be a good fit for you. I want to make sure you know, though, that there are limited housing resources immediately available.

The primary benefit of answering these questions is that it will help us give you information about the resources that best fit your situation.

If at any point you don't understand what I am asking, just let me know and I will help you understand what I want to know. Let's start with the first question..."

Once the client has answered the pre-screen questions, ask the individual to sign the Release of Information before entering the information into HMIS.

DEMOGRAPHICS –

Name:			
	First	Middle	Last
Social Security Number:			
Date of Birth:			Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF or Male to Female) <input type="checkbox"/> Trans Male (FTM or Female to Male) <input type="checkbox"/> Gender Non-Conforming (i.e. not exclusively male or female)		
Primary Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White		
Secondary Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White		
Ethnicity:	<input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Hispanic/Latino		

COORDINATED ENTRY PRE-SCREEN QUESTIONNAIRE –

1 Are you fleeing a dangerous situation? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES - STOP, refer to Victim Services Provider. If NO - continue...

Household Information

2 Where did you sleep last night? (what is your current housing status)

- Place not meant for habitation
- Emergency shelter, including hotel or motel paid for with emergency shelter voucher
- Safe Haven
- Interim Housing
- Foster care home or foster care group home
- Hospital or other residential non-psychiatric medical facility
- Jail, prison or juvenile detention facility
- Long-term care facility or nursing home

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- Psychiatric hospital or other psychiatric facility
- Substance abuse treatment facility or detox center
- Hotel or motel paid for without emergency shelter voucher
- Owned by client, no ongoing housing subsidy
- Owned by client, with ongoing housing subsidy
- Permanent housing (other than RRH) for formerly homeless persons
- Rental by client, no ongoing housing subsidy
- Rental by client, with VASH subsidy
- Rental by client, with GPD TIP subsidy
- Rental by client, with other ongoing housing subsidy (including RRH)
- Residential project or halfway house with no homeless criteria
- Staying or living in a family member's room, apartment or house
- Staying or living in a friend's room, apartment or house
- Transitional housing for homeless persons (including homeless youth)

3 How long have you been sleeping there?/how many times?

- One night or less Two to six nights
- One week or more, but less than one month One month or more, but less than 90 days
- 90 days or more, but less than one year One year or longer

**4 How many people are in your household?
(Is anyone with you?)**

--

5 **What is your main source of income?**

Alimony or Other Spousal Support

Child Support

Earned Income

General Assistance

Other: _____

Pension or retirement income from another job

Private Disability Insurance

Retirement Income from Social Security

SSDI

SSI

TANF

Unemployment Insurance

VA Non-Service Connected Disability Pension

VA Service Connected Disability Compensation

Worker's Compensation

6 **Are you or is anyone in your household a veteran?** YES NO

Client Doesn't Know Client Refused Data Not Collected

7 **Do you or anyone in your household have a disabling condition?** YES

NO

Client Doesn't Know Client Refused Data Not Collected

8 **Are you willing to relocate?** YES NO

Client Doesn't Know Client Refused Data Not Collected

IF YES - Do you have transportation? YES NO

Client Doesn't Know Client Refused Data Not Collected

9 **What is your phone number?** _____

10 **Are you interested in being added to the Housing Priority List?**

YES NO

Client Doesn't Know Client Refused Data Not Collected

11 **Last permanent address?** _____

Street

City State Zip

How long did you live there? _____

12 **Do you have friends or relatives in the area?** YES NO

If YES, what are their names and addresses and phone #?

LEGAL STATUS

13	Have you been convicted of a felony?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
14	Was it a violent offense?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
15	If yes, are you on the sex offender registry?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

SIGNATURE:

I/We certify that the information provided is an accurate and complete disclosure of the requested information.

Client Signature

Date